FILED EFFECTIVE



CERTIFICATE OF ASSUMED BUSINESS NAME

Pursuant to Section 53-504, Idaho Code, the undersigned submits for filing a certificate of Assumed Business Names

12 FF9 21 1 9: 36

STAFF OF STAFF

Please type or print legibly. Instructions are included on back of application.

The true name(s) and <u>business</u> address(
business under the assumed business na Name Mike Clements Gwen Clements	
The general type of business transacted Retail Trade Transportati Wholesale Trade Constructio Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estat	on and Public Utilities Submit Certificate of Assumed Business
The name and address to which future correspondence should be addressed: Gwen Clements 1980 E 1350 S Gooding, ID 83330	Secretary of State 450 North 4th Street PO Box 83720 Boise ID 83720-0080 208 334-2301
Name and address for this acknowledgm copy is (if other than # 4 above):	ent
ature: MUIN CLIMENT	Secretary of State use only

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